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CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block ) 590 01/26/201		- 1: <b>F</b>	ee(s) Transmittal. Thi	s certificate cannot be used	or domestic mailings of the for any other accompanying ent or formal drawing, must
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			Γ			(Depositor's name)
•						(Signature)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/654,949	09/654,949 09/01/2000		Peter Brittingham		011948-0033-999	7078
TITLE OF INVENTION: C	COMPUTER BASED TES	ST ITEM GENERATI	ION			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUI	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$870	\$0	\$0	\$870	04/26/2012
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS	7		
WILLIAMS, ROSS A 3714		3714	434-322000	<del></del>		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			Comparison of the patent front page, list     (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,     (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN	s an assignee is identified n 37 CFR 3.11. Completi	I below, no assignee on of this form is NO	THE PATENT (print or type) e data will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Princeton, NJ			
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government						
4a. The following fee(s) are submitted:  State Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3013 (enclose an extra copy of this form).			
5. Change in Entity Status  a. Applicant claims S	ee 37 CFR 1.27.	☐ b. Applicant is no l	onger claiming SMAI	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
interest as shown by the rec	ords of the United States	Patent and Trademark	Office.	uic applicant, a logi	stered attorney or agent, or t	the assignee or other party in
Authorized Signature	Martin	When	<u> </u>		April 2012	
•• •	Matthew W.		• •		io. 59,108	
This collection of information application. Confidential submitting the completed at this form and/or suggestion: Box 1450, Alexandria, Virgania 22313-Under the Paperwork Reductions of the collection of the Paperwork Reduction and applications of the Paperwork Reduction of the Paperwork Red	-1420.					nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, ol number.

PTOL-85 (Rev. 02/11) Approved for use through 08/31/2013.

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